

# Health Care Plan Details

***SmartChoice Health Care plans all contain the following benefits:***

- ✓ **Prescription drugs** (generic substitution) with a **Pay Direct Drug Card**
  - **Drug plan Deductible: NIL** or equal to the **Dispensing Fee** charged by the pharmacy *(depending on plan design chosen)*
  - **Drug plan annual maximum** per person per calendar year: **\$2000, \$5000, \$10000, or \$12,000** *(depending on plan design chosen)*
  - **Drug plan Reimbursement Percentage: 80% or 100%** *(depending on plan design chosen)*
  - **Drugs covered:** drugs that legally require a prescription, life sustaining drugs with a prescription, vaccines, injectable drugs, diabetic supplies (excludes fertility drugs, erectile dysfunction drugs, smoking cessation aids, weight loss drugs)
- ✓ **Semi-private hospital** accommodation payable at **100%**
- ✓ **Paramedical services** include: Chiropractor, Registered Massage Therapist (subject to doctor's approval), Naturopath, Physiotherapist, Psychologist, Osteopath, Speech Therapist, Podiatrist *(reimbursement percentage and calendar year maximum varies with plan design)*
  - **Paramedical Reimbursement Percentage: 80% or 100%** *(depending on plan design chosen)*
  - **Paramedical annual maximum per specialty** per person per calendar year: **\$350 or \$500** *(depending on plan design chosen)*
- ✓ **X-rays**
- ✓ **Vision Benefit** *(Optional benefit depending on plan design chosen): \$150 per 24 months* if 18 or over (per 12 months if under 18)
  - Includes: contact lenses, lenses & frames, prescription safety glasses, prescription sun glasses, laser eye correction surgery
- ✓ **Eye Examinations** payable at \$35 every 24 consecutive months
- ✓ **Private-duty Nursing** subject to \$10,000 every 5 years
- ✓ **Ambulance Services** subject to a \$1,000 maximum

## Health Care Plan Details

### ✓ Medical Supplies, Aids and Appliances

- Includes Orthotics: **\$150 per calendar year** for custom inserts
- Includes Orthopaedic Shoes:
  - **\$150 per calendar year** for stock item orthopaedic shoes/ modifications
  - **One pair** of custom made shoes per year
- Includes Hearing Aids subject to a limit of **\$500/5 years**
- Medical Supplies, Aids and Appliances **Reimbursement Percentage: 80% or 100%**  
*(depending on plan design chosen)*

### ✓ Emergency Travel Assistance Outside Canada: insured members are entitled to **100%** coverage on prescription drug expenses and emergency health care to a lifetime maximum of **\$2,000,000**.

- Includes:
  - **90 Day per trip limit**
  - Medical evacuation as required
  - Physician referral
  - Repatriation service to \$5,000 max.
  - Visit of Family Member
  - Vehicle Return

### ✓ Out-of-Province Referral: **80%** of Doctor's Fees and Semi-Private Hospital accommodation

### ✓ Benefit **terminates** at Age **75**